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| | | | |
|---|--|--------------------------------------|-------------------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | Complete if Known | |
| Fee Transmittal For FY 2009 | | Application Number | 10/555,817-Conf. #2769 |
| | | Filing Date | February 27, 2007 |
| | | First Named Inventor | Thomas, William FLEMING |
| | | Examiner Name | S. K. Kim |
| | | Art Unit | 3654 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | | |
| TOTAL AMOUNT OF PAYMENT | | (\$) 555.00 | |
| | | Attorney Docket No. 5478-0101PUS1 | |

METHOD OF PAYMENT (check all that apply)

| | | | | |
|---|--------------------------------------|--------------------------------------|-------------------------------|---|
| <input type="checkbox"/> Check | <input type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): _____ |
| <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u> | | | | Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u> |

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

| | |
|---|---|
| <input type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments |

FEES CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| <u>Application Type</u> | <u>FILING FEES</u> | | <u>SEARCH FEES</u> | | <u>EXAMINATION FEES</u> | | |
|-------------------------|--------------------|---------------------|--------------------|---------------------|-------------------------|---------------------|-----------------------|
| | <u>Fee (\$)</u> | <u>Small Entity</u> | <u>Fee (\$)</u> | <u>Small Entity</u> | <u>Fee (\$)</u> | <u>Small Entity</u> | <u>Fees Paid (\$)</u> |
| Utility | 330 | 165 | 540 | 270 | 220 | 110 | |
| Design | 220 | 110 | 100 | 50 | 140 | 70 | |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Small Entity</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> |
|---------------------|---------------------|-----------------|----------------------|---------------------|-----------------|-----------------|
| - or HP = | x | = | | | 52 | 26 |

HP = highest number of total claims paid for, if greater than 20.

220 110

Multiple dependent claims

390 195

| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> | |
|----------------------|---------------------|-----------------|----------------------|----------------------------------|----------------------|
| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
| - or HP = | x | = | | | |

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

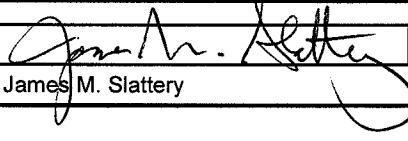
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|---|-----------------|----------------------|
| - 100 = | /50 = | (round up to a whole number) x | = | |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1253 Extension for response within third month 555.00

| | | | | | | |
|---------------------|---|--|--|--------------------------------------|-------------------|-------------------------------|
| SUBMITTED BY | | | | | | |
| Signature |  | | | Registration No. (Attorney/Agent) | 28,380 | Telephone (703) 205-8015 |
| Name (Print/Type) | James M. Slattery | | | Date | September 1, 2009 | |

